School Asthma Card

To be filled in by the parent/carer							
Child's nam	e						
Date of birt	h						
Address							
Parent/care name Telephone -							
home Telephone -	-						
Email							
Doctor/nurs	se's						
Doctor/nurs telephone	se's			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
This card is for your child's school. Review the card at least once a year and remember to update or exchange it for a new one if your child's treatment changes during the year. Medicines and spacers should be clearly labelled with your child's name and kept in agreement with the school's policy.							
Reliever treatment when needed For shortness of breath, sudden tightness in the chest, wheeze or cough, help or allow my child to take the medicines below. After treatment and as soon as they feel better they can return to normal activity.							
Medicine			Parent/carer's signature				
If the school holds a central reliever inhaler and spacer for use in emergencies, I give permission for my child to use this. Parent/carer's signature Date							
Expiry dates of medicines							
Medicine Expiry Date che		Date chec	cked Parent/carer's signature				
Parent/carer's signature Date							

What signs can indicate that your child is having an asthma attack?									
Does your child tell you when he/she needs medicine?									
Yes No									
Does your child need help taking his/her asthma medicines?									
Yes	Yes No								
What are your child's triggers (things that make their asthma worse)?									
Pollen [Stress						
Exercise			Weather						
	d/flu		Air pollution						
If other please list									
Does your child need to take any other asthma medicines while in the school's care?									
Yes	No								
If yes plea	se describe belo	W							
Medicine			How much and when taken						
Dates card checked									
Date	Name Job t		tle	Signature / Stamp					
To be completed by the GP practice									
What to do if a child is									
having an asthma attack									

- Help them sit up straight and keep calm.
- 2 Help them take one puff of their reliever inhaler (usually blue) every 30-60 seconds, up to a maximum of 10 puffs.
- Call 999 for an ambulance if:
 - their symptoms get worse while they're using their inhaler this could be a cough, breathlessness, wheeze, tight chest or sometimes a child will say they have a 'tummy ache'
 - they don't feel better after 10 puffs
 - you're worried at any time.
- You can repeat step 2 if the ambulance is taking longer than 15 minutes.



Any asthma questions?Call our friendly helpline nurses

0300 222 5800

(9am - 5pm; Mon - Fri)

www.asthma.org.uk

